

Consider & Choose Benefits for 2021

THE CITY OF ATLANTA

Active Employee Enrollment Guide



City of Atlanta Open Enrollment: **November 16 to 30, 2020**

Open Enrollment Period: November 16 to 30, 2020

Enrollment for your 2021 employee benefits will be held from Monday, November 16 to Monday, November 30, 2020, at 11:59 p.m. ET.

You must enroll in benefits if you wish to:

- Select coverage for the first time
- Change benefit plans
- Add a dependent
- Participate in a Flexible Spending Account
- Participate in voluntary benefit plans

The options you select will be effective from January 1, 2021, through December 31, 2021, unless you have a qualifying life event.

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Post 3 At Large Andre Dickens

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Chief Of Staff Carmen Chubb
Interim Commissioner Of Human Resources .. Jeffrey B. Norman

Benefits & Enrollment Website

Our benefits website at **benefits.atlantaga.gov** includes detailed information about:

- Available benefits and plan rates
- Frequently asked questions
- Eligibility and proof of dependent eligibility
- Making mid-year plan changes
- How to enroll in benefits
- More information, including required notices, summaries of coverage and a glossary of terms

For information about the Wellness Center and our wellness programs, please visit **wellnesscenter.atlantaga.gov**.

Plan Changes for 2021

Anthem BCBS HDHP

- No changes to this plan.
- Premium increase.

Anthem BCBS POS

- No changes to this plan.
- Premium increase.

Kaiser Permanente High-Deductible HMO

- Individual and family deductibles are increasing.
- Premium increase.

Kaiser Permanente HMO

- No changes to this plan.
- Premium increase.

Flexible Spending Accounts

- No changes to these plans.
- Contribution limits increase slightly.

Dental Plan

- No changes to this plan.
- Premium increase.

Vision Plan

- No changes to this plan.
- Premiums will not change.

Life Insurance

- No changes to this plan.
- Rates will not change.
- Check your beneficiaries and update as appropriate.

Short-Term Disability Plan

- No changes to this plan.

Voluntary Insurance Products

- No changes to these plans.

Retirement Plans

- New plan administrators.

How to Enroll

There are two ways to access the enrollment system:

1. Go to benefits.atlantaga.gov and click the red "Enroll in Benefits" button on the home page, or
2. Go directly to the ATL Cloud site at <https://ehxr.login.us2.oraclecloud.com/>. In either case, follow the instructions below.

Enrollment Instructions

From the ATL Cloud website: <https://ehxr.login.us2.oraclecloud.com/>

1. To log in, enter your username and password. (If you need an Oracle password reset, click "FORGOT PASSWORD" on the main screen and change the password.)
2. After you log in, under Apps, click on the orange "My Benefits" icon.
3. Next, click on the blue "Change Benefit Elections" box under "Start Enrollment."

Dependents and Beneficiaries

- Enter anyone you want to list as a dependent and/or beneficiaries, if they are not already listed in the system.
- Confirm dependent and/or beneficiaries' information already entered in the system is correct.
- To create a new contact, click "Create Contact."
- Enter the person's Name and Relationship. You must complete the "Relationship," "Relationship Start Date," "Last Name," and "First Name" fields. The relationship start date you enter must be a date prior to the Open Enrollment start date.
- Enter their address information, or if they share the same residence as you, check the "Copy my home address" box.
- Finish completing the remaining fields, if necessary.
- When finished, click the "Save and Close" box at the top of the screen.
- Repeat these steps as many times as necessary to add dependents and beneficiaries.
- When you are ready to continue, click "Continue."
- A warning will pop up. If you have added all of the dependents you intend to add, click "Continue Enrollment."
- When you see the "Authorization" page, read the information and click "Accept."

Edit Benefits

- Review the available plans and click "Select" next to the option(s) of your choosing.
- Scroll to the top of the page and click "Next."
- Select your plan.
- If you are enrolled in a High Deductible Health Plan, determine the amount you would like to save in your Health Savings Account. Enter that value into the "Coverage" box.
- Scroll to the top of the page and click "Next."
- Select your Dental and Vision Plan.
- Select your Life Insurance and enter the coverage value.
- Select a Flexible Spending Account option and enter the coverage value.
- Specify what percentage of any insurance payouts you want each of your beneficiaries to receive.
- Choose which beneficiaries would receive anything as a primary recipient. (For example, will your spouse receive 100% of the benefit if something happens to you?)
- Choose which beneficiaries would receive anything as a contingent recipient. (For example, what will your children receive if something happens to you and your primary recipient?)
- To recalculate your total, click "Recalculate." Both the primary and contingent percentages should equal 100%.
- Repeat for additional policies listed.
- When you are ready to continue, click "Next."
- Review your plan. If there are errors, click "Back" and make the necessary corrections.
- If everything is correct, click "Submit."

Important Notes

- You cannot select both a Health Savings Account and Flexible Spending Account. You can only select one of those options.
- You cannot select a Health Savings Account unless you are enrolled in a High Deductible Health Plan.
- If you add a "New Dependent," you must upload the dependent verification to your documents of record or you can submit to the Insurance Division.

Your 2021 Benefit Options



The City of Atlanta offers four Medical Plan options.

High-deductible options:

- Anthem BCBS High-Deductible Health Plan (HDHP) with Health Savings Account (HSA)
- Kaiser HMO High-Deductible Health Plan (HDHP) with Health Savings Account (HSA)

Traditional Medical Plan options:

- Anthem BCBS POS
- Kaiser Permanente HMO

Each of the plans cover 100% of in-network preventive care, even before you meet the deductible. Each plan also provides prescription drug benefits according to a tiered coverage system. You will pay the least for prescriptions when you choose generics and/or use the mail order service.

This year, consider the two high-deductible plans. Though the deductible is higher than in a traditional plan, the paycheck contribution is significantly lower. This means your out-of-pocket costs for the year might be less than what you would pay under a traditional plan option.

High-deductible Medical Plan Options			
Plan Provision	How It Works		
Health Savings Account First, use your HSA to pay for covered services. You can contribute pretax dollars to the HSA and use them to help meet your annual deductible. Unused HSA funds roll over from year to year.	2021 Contributions to Your HSA For 2021, you can contribute pretax dollars from each paycheck up to the following limits: <ul style="list-style-type: none"> • \$3,600 for individual coverage • \$7,200 for family coverage • \$1,000 catch-up contribution for members age 55 or older (not a lump-sum contribution) These limits apply to all combined contributions from any source, except rollover funds.		
City of Atlanta Contribution The City makes a contribution to help you get started.	Employer HSA Contribution <ul style="list-style-type: none"> • \$500 for individual coverage • \$750 for family coverage 		
Free Preventive Care To help you stay healthy, preventive care is covered at 100%.	Preventive Care There is no deduction from your HSA or any out-of-pocket costs for you if you receive your preventive care from in-network providers. Preventive care may include certain screenings, immunizations, and physician visits.		
Meet Your Deductible The deductible is the annual amount you pay, either out-of-pocket or using your HSA, before you reach the traditional health coverage portion of the plan.	Anthem BCBS HDHP with HSA		Kaiser HMO HDHP with HSA
	In-Network <ul style="list-style-type: none"> • \$1,300 individual • \$3,900 family 	Out-of-Network <ul style="list-style-type: none"> • \$2,500 individual • \$5,000 family 	In-Network Only <ul style="list-style-type: none"> • \$1,400 individual • \$4,200 family
Traditional Health Coverage After you meet your deductible, the plans work like traditional plans. You pay coinsurance (a percentage of charges), and the plan pays the rest.	In-Network <ul style="list-style-type: none"> • Plan pays 80% after deductible for in-network providers • Plan pays 80% after deductible for in-network pharmacies 	Out-of-Network <ul style="list-style-type: none"> • Plan pays 60% after deductible for out-of-network providers • Plan pays 80% after deductible for out-of-network pharmacies 	In-Network Only Plan pays 90% after deductible for covered services
Out-of-Pocket Maximum For your protection, the total amount you spend out-of-pocket is limited. Once you spend that amount, the plan pays 100% of the cost for covered services for the remainder of the year.	In-Network <ul style="list-style-type: none"> • \$3,500 individual • \$7,000 family Deductible counts toward maximum	Out-of-Network <ul style="list-style-type: none"> • \$7,000 individual • \$14,000 family Deductible counts toward maximum	In-Network Only Under the Kaiser plan, you meet your out-of-pocket maximum once you've met your annual deductible.

Traditional Medical Plan Options			
Plan Provisions	Anthem BCBS POS		Kaiser Permanente HMO
	In-Network	Out-of-Network	
Lifetime Maximum	Unlimited	Unlimited	Unlimited
Deductible (individual/family)	\$500/\$1,500	\$800/\$2,400	\$500/\$1,500
Annual Out-of-Pocket Maximum (individual/family)	\$2,500/\$7,500	\$4,000/\$12,000	\$2,500/\$7,500
Coinsurance	90%	70%	90%
Preventive Care			
Immunizations	100% (no copay)	70% after deductible	100% (no copay)
Pap Smear/Mammography/ Prostate Screening	100% (no copay)	70% after deductible	100% (no copay)
Routine Physicals	100% (no copay)	70% after deductible	100% (no copay)
Office Visits			
Primary Care	\$20 copay	70% after deductible	\$20 copay
Specialist	\$40 copay	70% after deductible	\$35 copay
Emergency Services	\$300 copay (waived if admitted)		
Inpatient Hospital	90% after deductible	90% after deductible	90% after deductible
Outpatient Hospital Services • Hospital Charges • Diagnostic X-ray/Lab Services • Physician Services	90% after deductible	90% after deductible	90% after deductible
Mental Health/Substance Abuse			
Inpatient & Partial Hospitalization Fees/Services	90% after deductible	70% after deductible	90% after deductible
Outpatient Mental Health Treatment	90% after deductible	70% after deductible	\$20 copay (unlimited visits)
Additional Services			
Ambulance Service	100% after \$300 copay	100% after \$300 copay	100% after \$300 copay
Skilled Nursing Facility (100-day max)	90% after deductible	70% after deductible	90% after deductible
Home Health Care	100% after deductible (40 visits per year max)	70% after deductible	No charge (120 visits per year max)
Hospice Care	100% after deductible	100% after deductible	No charge
Prescription Drugs*			
Generic (30-day supply)	\$15	70% after deductible	\$20 KP/\$30 NWK
Preferred Brand (30-day supply)	\$30	70% after deductible	\$40 KP/\$50 NWK
Non-Preferred Brand (30-day supply)	\$40	70% after deductible	N/A
Specialty Drugs	80% (\$80 min/\$120 max)	N/A	80% (\$80 min/\$120 max)
Mail Order (90-day supply)	2x retail copay	Not covered	2x retail copay
Vision			
Eye Exam (Only for injury or disease of the eye.)	\$20 copay PCP \$40 copay Specialist	70% after deductible	\$30 copay

* Medications with a generic equivalent will be filled as generic unless the physician indicates DAW (dispense as written). If DAW is not indicated, members who choose the brand over the generic will pay the applicable copayment plus the difference in cost between the brand name and the generic. All specialty medications must be filled through the mail order program.



Mental Health

If you or a family member have any mental health needs, please review the medical benefits carefully. There are significant differences related to mental health coverage.

Please feel free to call the COA's Psychological Services/ Employee Assistance Program (PS/EAP) office at **404-546-3074**, if you would like to discuss your individual needs to ensure that you select the best coverage for you and your family members.



Health Savings Account

If you enroll in the Anthem BCBS HDHP or Kaiser HMO HDHP, you also are eligible to enroll in a Health Savings Account (HSA). You can use the funds in your HSA to pay for eligible healthcare expenses.

Eligible healthcare expenses may include:

- Medical, dental and vision deductibles
- Medical, dental and vision coinsurance
- Medical, dental and vision copays

There are two ways to fund your HSA:

1. The City of Atlanta will contribute to your HSA each year — \$500 for individuals, and \$750 for families (employee plus one or more dependents).
2. You also can contribute to the HSA up to certain IRS limits that are noted on the prior page.

HSA funds are yours to keep even if you change medical plans or leave employment with the City. Funds roll over from year-to-year, and you can use them for eligible healthcare expenses even into retirement.

The HSA is not available if you enroll in the Anthem BCBS POS Plan or the Kaiser HMO.



Flexible Spending Accounts

The Anthem Act Wise Flexible Spending Accounts (FSAs) offer you the opportunity to save for and pay certain health and dependent care expenses with pretax dollars. Participating in an FSA reduces your taxable income, which means you owe less tax and spend less for qualified expenses. The amount you may contribute to an FSA is determined by the IRS annually and is noted in the enrollment system.

The City offers two types of FSAs: one for health care and another for dependent day care.

- The Health Care FSA is available if you enroll in the Anthem BCBS POS Plan or the Kaiser HMO. It is not available if you enroll in the Anthem BCBS HDHP or Kaiser HMO HDHP. You can contribute up to \$2,750 in 2021. You will lose any money over \$550 left in your Health Care FSA after March 31, 2022, so plan your expenses carefully. \$550 can be rolled over into the next year.
- The Dependent Care FSA is available regardless of your Medical Plan enrollment. You can contribute up to \$5,000 in 2021. You will lose any money left in your Dependent Care FSA after March 31, 2022, so plan your expenses carefully.

All FSA-eligible expenses must be incurred between January 1 and December 31, 2021. Claims for reimbursement must be filed before March 31, 2022.



Dental Plan Options

The City of Atlanta offers three dental plan options:

- Anthem BCBS Dental PPO - High Option (with orthodontia coverage)
- Anthem BCBS Dental PPO - Low Option (without orthodontia coverage)
- Aetna DHMO

The Anthem BCBS plans allow you to seek care in- or out-of-network, although you'll save when you stay in-network. The Aetna plan only allows coverage in the plan's network.

Anthem BCBS Dental PPO		
	High Option (with orthodontia)	Low Option (without orthodontia)
Annual Benefit Maximum (per person)	\$2,000	\$2,000
Annual Deductible (individual/family)*	\$50/\$150	\$50/\$150
Dental Services	Plan pays:	Plan pays:
Diagnostic and Preventive Services (exams, cleanings, X-rays)	100%	100%
Basic Services (fillings, extractions, root canals, periodontic scaling, and root planing)	80%	80%
Major Services (crowns, dentures, bridges)	50%	50%
Orthodontic Services (adults and dependent children)	50%	Not covered
Orthodontic Services Lifetime Maximum (per person)	\$1,500	N/A

* Deductible waived for diagnostic/preventive services.

Aetna DHMO	
	In-Network Coverage Only
Diagnostic and Preventive Services <ul style="list-style-type: none"> • Exams • Cleanings • Routine X-rays 	You pay \$0 You pay \$0 You pay \$0
Basic Services <ul style="list-style-type: none"> • Fillings • Simple extractions • Root canals (anterior/bicuspid) • Periodontal scaling 	You pay \$22 - \$80 You pay \$12 - \$30 You pay \$150 - \$195 You pay \$39 - \$65
Major Services <ul style="list-style-type: none"> • Root canals (molar) • Crowns • Dentures • Bridges 	You pay \$435 You pay \$445 - \$488 You pay \$513 - \$719 You pay \$475 - \$488
Orthodontic Services (up to 24 months of treatment) <ul style="list-style-type: none"> • Adults • Dependent children (up to age 19) 	You pay \$2,400 You pay \$2,400



The Vision Plan is administered by UnitedHealthcare Vision. You can choose from private practice providers and retail chain providers. When you use in-network providers, you'll pay less for care.

Plan Provisions	In-Network	Out-of-Network
Vision Exam	You pay \$15 Available once every 12 months Refractive measures such as lenses, frames, and contact lenses are covered under the UHC Vision Plan. Medical Plan participants are allowed one annual vision exam under the Medical Plan; however this does not include evaluation or coverage for glasses or contacts.	Plan pays up to \$40
Eyeglass Lenses <ul style="list-style-type: none"> • Single Vision • Bifocal • Trifocal • Lenticular 	You pay \$25 Available once every 12 months	Plan pays up to \$40 Plan pays up to \$60 Plan pays up to \$80 Plan pays up to \$80
Eyeglass Frames	Plan pays \$130 Available once every 12 months	Plan pays up to \$45
Contact Lenses in Lieu of Eyeglasses <ul style="list-style-type: none"> • Elective • Necessary 	You pay \$25 and any amount over \$150 Available once every 12 months	Plan pays up to \$150 Plan pays up to \$210
Laser Vision Correction	UnitedHealthcare Vision has partnered with QualSight LASIK, for access to discounted laser vision correction providers. Member savings represent up to 35% off the national average price of traditional LASIK. Contracted prices start at \$945 per eye for traditional LASIK and \$1,395 per eye for custom LASIK. For more information visit myuhcvision.com .	Not available
Hearing Aid Discount	UnitedHealthcare Hearing offers discounts for hearing aids through our uhchearing.com website or you can call 1-855-523-9355. Mention promo code UHC MYVISION to receive discounted pricing for your hearing aid, ranging from Basic, Essential, Advanced and Premium Hearing Aids.	



Life Insurance

The City of Atlanta provides you with a basic amount of Group Life Insurance and Accidental Death and Dismemberment (AD&D) Insurance to help protect your loved ones in the event of your death. There is an additional "In the Line of Duty" Benefit for First Responders.

You also may be eligible to purchase additional life insurance for yourself and your dependents. This supplemental coverage may require proof of insurability.

Insurance Plan	Benefits Coverage
Basic Employee Life and AD&D	The City provides \$40,000 in coverage.
Supplemental Employee Life and AD&D	You may purchase 1x base salary in increments of \$10,000 up to \$200,000.
Supplemental Spouse/Domestic Partner Life Insurance	You may purchase \$5,000 in coverage. A Surviving Spouse/Domestic Partner who is insured at the time an employee passes away will be eligible to continue his/her \$5,000 Life Insurance coverage.
Supplemental Child Life Insurance	You may purchase: Birth to 6 months: \$600 6 months to 26 years: \$5,000



Short-Term Disability

AFLAC's Short-Term Disability (STD) Insurance offers a monthly benefit to replace up to 60% of your gross income if you are disabled and can't work due to a covered accident or covered sickness.

You may choose the amount of your disability benefits (subject to income limits):

- Up to 60% of your gross monthly income up to \$4,000 per month with Guaranteed Issue (no health questions).
- Higher monthly benefits are available up to \$7,500 per month with additional underwriting.

When you enroll, you may choose on/off-the-job or off-the-job only coverage. You also may choose how soon benefits are paid and how long benefits will last.



Voluntary Benefits

Our voluntary insurance plans are offered by MetLife.

If you're sick or hurt, MetLife pays benefits directly to you to help with your eligible expenses. Coverage also is available to your spouse and dependent children.

- Lump Sum Critical Illness Insurance
- Cancer Care Insurance
- Accident Indemnity Insurance
- Hospital Indemnity Insurance
- Critical Care and Recovery Insurance

If you would like to enroll online in the City's MetLife voluntary benefits, you can do so by clicking on enroll.employeenavigator.com or by entering enroll.employeenavigator.com in your Internet browser.

Wellness Programs

The DHR – Employee Benefits manages a comprehensive health and wellness program for the City's active and retired employees and their families. For more information about the activities listed below, contact the DHR – Employee Benefits office at 404-330-6036.

Disease Management

Contracted insurance vendors manage chronic diseases such as diabetes, heart disease, coronary artery disease (including circulatory restrictions and strokes), musculoskeletal disorders (including lower back pain), and digestive disorders. These are the top five chronic diseases prevalent in our population. Your Medical Plan carrier may reach out to you, offering support if you are coping with any of these chronic diseases.

Incentive Program

Active employees can earn up to \$300 in wellness incentives at the end of the plan year.

Anthem BCBS offers plan participants the following incentives:

- \$100 for an annual physical exam with your primary care physician
- \$25 for mammogram
- \$50 for colon screening
- \$25 for a claims process flu shot or for obtaining a biometric screening, sponsored by the City of Atlanta
- Up to \$100 for reaching points level 2 (\$25) each quarter through the City of Atlanta's Mobile Health Consumer app

Participants in the Kaiser medical option also may earn up to \$300 in wellness incentives.

All 2021 incentive amounts must be earned, redeemed and rewarded by December 31, 2021. Incentives will be delivered as a gift card.

COA Employee Wellness Center

Employees who are enrolled in a City-sponsored Medical Plan are eligible to use the City's onsite health clinic. You must present a proper Medical Plan ID card. Free medical and pharmacy services will be available. When you use the Wellness Center, you save on office visit copays and may receive generic medications at no cost to you.

For information about the City's Wellness Center facility, please visit wellnesscenter.atlantaga.gov.

Active Employee Rates

Medical Plans

	Anthem BCBS HDHP		Anthem BCBS POS	
Bi-Weekly Rates	Your Cost	City Cost	Your Cost	City Cost
Employee Only	\$78.84	\$224.38	\$94.86	\$269.97
Employee + Child(ren)	\$139.38	\$396.71	\$166.09	\$472.70
Employee + Spouse/Domestic Partner	\$197.33	\$561.62	\$237.34	\$675.51
Employee + Family	\$260.55	\$741.56	\$313.38	\$891.94
	Kaiser HDHP		Kaiser HMO	
Bi-Weekly Rates	Your Cost	City Cost	Your Cost	City Cost
Employee Only	\$73.36	\$208.78	\$88.09	\$250.71
Employee + Child(ren)	\$121.97	\$347.16	\$154.30	\$439.14
Employee + Spouse/Domestic Partner	\$183.39	\$521.96	\$220.21	\$626.75
Employee + Family	\$242.06	\$688.93	\$290.68	\$827.32

Dental Plans

	Anthem BCBS Dental High Option		Anthem BCBS Dental Low Option	
Bi-Weekly Rates	Your Cost	City Cost	Your Cost	City Cost
Employee Only	\$3.64	\$10.37	\$3.39	\$9.65
Employee + Child(ren)	\$7.71	\$21.96	\$6.55	\$18.66
Employee + Spouse/Domestic Partner	\$7.44	\$21.19	\$6.90	\$19.62
Employee + Family	\$12.21	\$34.74	\$10.41	\$29.63
	Aetna DHMO			
Bi-Weekly Rates	Your Cost	City Cost		
Employee Only	\$1.36	\$3.87		
Employee + Child(ren)	\$2.45	\$6.98		
Employee + Spouse/Domestic Partner	\$2.66	\$7.57		
Employee + Family	\$4.09	\$11.66		

Vision Plan

	UnitedHealthcare Vision	
Bi-Weekly Rates	Your Cost	City Cost
Employee Only	\$1.51	\$0.00
Employee + Child(ren)	\$3.32	\$0.00
Employee + Spouse/Domestic Partner	\$3.16	\$0.00
Employee + Family	\$4.28	\$0.00

Life Insurance Plans

	Anthem Life Insurance
Bi-Weekly Rates	Your Cost
Basic Life - 1x salary	\$0.377 per \$1,000
Basic AD&D - 1x salary	\$0.024 per \$1,000
Additional Life	\$0.377 per \$1,000
Dependent Life (Spouse/Domestic Partner)*	\$3.600 per month
Dependent Life (Child)*	\$1.070 per month

*\$5,000 maximum coverage

Important Contact Information

Contact	Address	Phone / Website
Benefits/Programs		
DHR – Employee Benefits	68 Mitchell St. SW Suite 2120 Atlanta, GA 30303	Phone: 404-330-6036 Fax: 404-658-6640
City of Atlanta Employee Wellness Center	235 Central Ave. SW Atlanta, GA 30303	Health Clinic: 404-546-4730 Fitness Center: 404-546-4745
Pension Services	68 Mitchell St. SW Suite 2107 Atlanta, GA 30303	404-330-6607
Strategic Benefit Advisors, Inc.* (General Pension Fund) (Fire & Police Pension Fund)	2472 Jett Ferry Road Suite 400-410 Atlanta, GA 30338	COA Pension Center: 888-594-0216 coapension@sba-inc.com
Employee Assistance Program	2 City Plaza 72 Marietta St. Atlanta, GA 30315	404-546-3074

* Effective January 1, 2021

Benefit Providers

Contact	Phone	Website
Medical Plans		
Anthem BCBS POS	1-800-368-0766	www.anthem.com
Kaiser Permanente HMO	1-888-865-5813 or 404-261-2590	www.kp.org
Other Health Plans		
Aetna DHMO	1-877-238-6200	www.aetna.com
Anthem BCBS Dental	1-877-604-2158	www.anthem.com
UnitedHealthcare Vision	1-800-638-3120	www.myuhcvision.com
Life & Disability Insurance		
Anthem Life	1-800-552-2137	www.anthemlife.com
AFLAC Short-Term Disability	1-678-886-9454	www.aflac.com
Supplemental Plans		
MetLife (voluntary plans)	1-800-GET-MET8 (800-438-6388)	www.mybenefits.metlife.com
Prudential Financial Services*	1-877-778-2100	www.prudential.com/online/ retirement
Anthem Act Wise Flex Spending	1-844-858-1839	www.anthem.com
Retirement Plan		
Prudential Financial Services*	1-877-778-2100	www.prudential.com/online/ retirement

* Effective January 1, 2021

This document provides a summary of benefits available to City of Atlanta active employees and eligible dependents, as well as laws, procedures, and regulations required to obtain and use such benefits. However, if inconsistencies occur between the contents of this document and the contracts, rules, or laws regulating administration of the various programs, the program contract terms and/or appropriate legislation supersede this document. In some instances, limitations and exclusions may apply.

Should you have questions, please contact the benefit program's member services or the Department of Human Resources (DHR) Employee Benefits. Contact information is included in this document.

